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Bib Data Sheet

CONFIRMATION NO. 1180

SERIAL NUMBER 09/731,912	FILING DATE 12/08/2000 RULE	CLASS 202	GROUP ART UNIT 2176	ATTORNEY DOCKET NO. 1508-3220	
APPLICANTS Eric Allan Bier, Mountain View, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/23/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 14	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
ADDRESS Gunnar G. Leinberg, Esq. NIXON PEABODY LLP Clinton Square P.O. Box 31051 Rochester, NY 14603					
TITLE Systems and methods for editing a web page					
FILING FEE RECEIVED 836	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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BIBDATASHEET**CONFIRMATION NO. 1180**

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SERIAL NUMBER 09/731,912	FILING DATE 12/08/2000 RULE	CLASS 707	GROUP ART UNIT 2176	ATTORNEY DOCKET NO. 1508-3220
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APPLICANTS
Eric Allan Bier, Mountain View, CA;

** CONTINUING DATA *****
NO

** FOREIGN APPLICATIONS *****
NO

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 01/23/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 14	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		
Verified and Acknowledged				

ADDRESS
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Rochester, NY
14603

TITLE
Systems and methods for editing a web page

FILING FEE RECEIVED 836	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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